

Anyone interested in serving on a board or commission is encouraged to complete and submit this form.

* Indicates required information

Personal Information		
Title	☐ Mr. ☐ Mrs. ☐Ms.	
First Name *		
Middle Initial		
Last Name *		
Gender	☐ Male ☐ Female	
Spouse's Name		
Are you a registered voter? *	☐ Yes ☐ No	
If yes, then in which county?		
Party Affiliation	☐ Democrat ☐ Republican ☐ Independent ☐ Other	
Street Address *		
City *		
State *		
Zip Code *		
Home Phone * (000) 000-0000		
Fax Number (000) 000-0000		
Email Address *		
Have you resided at your current residence less than 5 years?	☐ Yes ☐ No	
If yes, please list all residences for the past five years.		
Are you a citizen of the U.S.?	☐ Yes ☐ No	
If No, please list the country:		
In what Missouri Senate District do you reside (1-34)?		
In what U.S. House of Representatives District do you reside (1-9)?		
Current Employer Information		
Title		
Company		
Address		
City		
State		
Zip Code		
Business Phone		
Business Fax		
Email Address		
List of Duties		

Boards and Commissions Appointment Application (continued) Specific Board or Commission Position(s) Desired (Please list at least one!)		
Please list specific position(s)		
Additional Employment History (List up to five employers)		
Employer		
Employer's Address		
Title/Type of Business		
Employed From (mm/dd/yyyy)		
Employed To (mm/dd/yyyy)		
List of Duties		
Employer		
Employer's Address		
Title/Type of Business		
Employed From (mm/dd/yyyy)		
Employed To (mm/dd/yyyy)		
List of Duties		
Employer		
Employer's Address		
Title/Type of Business		
Employed From (mm/dd/yyyy)		
Employed To (mm/dd/yyyy)		
List of Duties		
Employer		
Employer's Address		
Title/Type of Business		
Employed From (mm/dd/yyyy)		
Employed To (mm/dd/yyyy)		
List of Duties		
Employer		
Employer's Address		
Title/Type of Business		
Employed From (mm/dd/yyyy)		
Employed To (mm/dd/yyyy)		
List of Duties		

Boards and Commissions Appointment Application (continued) Educational History * Indicates required information		
Select the highest grade completed *	☐ 8 or less ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ GED	
Enter either the number of years of college completed or college credit hours earned		
Years Completed		
Hours Completed		
College/Graduate School		
College Location		
From Date		
To Date		
Degree		
Major		
College/Graduate School		
College Location		
From Date		
To Date		
Degree		
Major		
College/Graduate School		
College Location		
From Date		
To Date		
Degree		
Major		
College/Graduate School		
College Location		
From Date		
To Date		
Degree		
Major		

Boards and Commissions Appointment Application (continued) Please list Professional Licenses and Certificates		
Licenses/Certificates	Date Issued (mm/dd/yyyy)	
Please list all current organizations and societies of which you are a member:		
Organization/Societies	Member From (mm/dd/yyyy)	

You may wish to attach a copy of your resume to compliment the information you've provided on the Boards and Commission Appointment Application form. To ensure we match your resume with the information you've submitted, please identity your resume to match your full name.